

Case Manager's Discussion Guide for the Administration of Individual Experience Assessments (IEAs): *Suggested Talking Points*

BACKGROUND: The following document is intended to provide suggested language for a Case Manager/ Care Coordinator to use when conducting Individual Experience Assessments (IEAs), and the individual being assessed may benefit from some extra assistance in understanding the intent of each question.

DISCUSSION GUIDE	
Section B. All Residential Settings (Provider-Owned and Controlled, Shared Living with Related Caregiver, and Shared Living with Unrelated Caregiver)	
<p>HCBS Requirement #1: The setting was selected by the individual from among setting options, including non-disability specific settings.</p> <p><i>I'd like to hear a little bit about how you chose to live here. It's important that you have choices on where to live so that you say what you want.</i></p>	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
<p>1. Did you get to choose where you live?</p> <ul style="list-style-type: none"> If YES, why did you choose to live here? (enter in comments) If NO, who chose where you live for you? (enter in comments) 	<ul style="list-style-type: none"> <i>Do you know you can live in different types of places, including those that have people with disabilities and those that don't have people with disabilities? Were told you had these choices?</i>
<p>2. Did you get to see other places as well as this one before you made a decision on where to live?</p>	<ul style="list-style-type: none"> <i>How did you decide where you wanted to live? Did you go see other places and ask questions before moving in? Did you see pictures or have a conversation? Or were you just told by someone that this is where you were going to live and that you were moving in?</i>
<p>3. [ONLY ASK THIS QUESTION TO INDIVIDUALS THAT CURRENT RESIDE IN A DISABILITY-SPECIFIC SETTING, LIKE A GROUP HOME. ENTER N/A IF NOT LIVING IN A DISABILITY SPECIFIC SETTING]</p> <p>Did you get a chance to consider living somewhere that did not include other people with disabilities?</p>	

HCBS Requirement #2: Facilitates individual choice regarding services and supports and who provides them.

The next questions I'm going to ask are to see if you can choose the types of services and supports you receive here, and if you have a say in who supports you here?

SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
4. Do you like the services you receive?	
5. Can you choose which staff work with you?	<ul style="list-style-type: none">• <i>What types of things do you like about where you live? What don't you like? Does where you live fit well with the type of home you asked for?</i>
6. If you are unhappy with where you live, or with a staff person, do you know how to request a change?	<ul style="list-style-type: none">• <i>Do you like the people who help you? If you felt uncomfortable or didn't like a staff, would you feel comfortable telling anyone? Who would you talk to?</i>• <i>Have you ever had to ask for a change in a staff person? If so, what happened? Did you get a new staff person?</i>• <i>Do you know what to do if you are unhappy?</i>
7. Have you ever told someone (for example, your case manager, your guardian or someone that works here—please indicate in comments) that you would like to live somewhere else or spend your day doing something else and were told that you had to stay here and could not do what you wanted?	<ul style="list-style-type: none">• <i>What types of things do you like about how and where you spend your day? Has anyone ever asked you about the types of things you like and want to do with your day? Do your services help you do the types of things you want to do (like work, enjoy a hobby, volunteer, spend time with friends, work out)?</i>• <i>Have you ever said you would like to live somewhere else or spend your day somewhere else and were told that you had to stay here and could not do what you wanted?</i>

HCBS Settings Requirement #3: Allows the individual to control personal resources.

Now we're going to talk about your personal money. Many people need help buying an item they would like to have, but you should always be able to get to your personal money for things you want and need. This is about you having access to your money and having the right to choose and be a part of decisions on how to spend your personal money (not staff keeping it from you).

SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
8. Can you use your spending money when you want it? <ul style="list-style-type: none">• Where do you keep it? (please enter in comments)	<ul style="list-style-type: none">• <i>When you want money to go out (for example, to the movies, or to eat at a restaurant you like, or to pay for something you like to do with friends), tell me, how do you get your money?</i>• <i>Where is your money kept? Who keeps it? Can you go to the bank yourself to get your money, or does someone need to go with you?</i>
9. Can you choose how to spend your personal spending money? <ul style="list-style-type: none">• What are some things you've bought lately? (please enter in comments)	<ul style="list-style-type: none">• <i>What have you bought lately, like in the last month, on your own or with supports if needed and no one bought it for you?</i>• <i>Do you feel like you can use your money to buy food, clothing, or personal toiletries (like a special soap or shampoo or item for your hair) when you want to?</i>
10. Are you able to use other personal items (like your phone or computer) whenever you want to? <ul style="list-style-type: none">• If not, what restrictions do you have on when you can use these items? (please enter in comments)	<ul style="list-style-type: none">• <i>Have you ever been told you can't have your money by a staff person? If so, do you remember the reason they told you that you couldn't use your money to buy something?</i>

HCBS Requirement #4: Provides opportunities to seek employment and work in a competitive environment.

The next set of questions are about work, if you have a job right now. I'm going to ask you some questions about your job and what it's like at work.

SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
11. Do you have a job (paid)? Where do you work? How many hours? (enter in comments)	<ul style="list-style-type: none">• <i>How long have you had your job? Where do you work?</i>

	<ul style="list-style-type: none"> <i>How often do you go to work? Would you like to work more often than you do now?</i>
<p>12. Do you like your job? [Enter N/A if the individual doesn't have a job]</p> <ul style="list-style-type: none"> If not, have you asked if you can try to work someplace else? And if you asked to work elsewhere, what was the response? (enter in comments) 	<ul style="list-style-type: none"> <i>How did you get your job? Do staff offer to take you to/from work or make sure you have transportation? If not, does someone else support you in getting to/from work, or have you been taught how to use public transportation on your own?</i> <i>What types of things do you do in your job? Is it a job that you enjoy doing?</i> <i>Who else do you work with? Do you get to see and talk with people who work in different areas of your work? Are there some people who have a disability and some who don't?</i> <i>Does anyone ever talk to you about what other types of work you might be interested in the future? Or whether you'd like to work more hours, try different tasks, or work with different people?</i> <i>Do your staff help support you to get ready for work? e.g. getting up on time, getting your lunch ready, making sure you have work clothes available, knowing your schedule?</i>
<p>13. If you do not have a job, do you want one? [Enter N/A if the individual has a job]</p> <ul style="list-style-type: none"> If yes, have you asked for help finding a job? If so, what was the response staff gave to you? (enter in comments) 	<p>If you do not have a job right now, I'm going to ask you some different questions to learn whether or not you are interested in work and whether anyone has ever talked to you about your options to seek employment.</p> <ul style="list-style-type: none"> <i>Do staff tell you that work is possible? Do they encourage you to think about and try work? Ask you about what types of work interest you?</i> <i>Has anyone ever talked to you about whether or not you'd like help finding a job in your town or neighborhood?</i>
HCBS Settings Requirement #5: Is integrated in and supports full access to the greater community.	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
<p>14. Are you able to get information and do staff tell you about things going on in the community that you might be interested in?</p>	<ul style="list-style-type: none"> <i>How do you find out about activities or things to do in your community?</i> <i>Do you work with your staff to develop a schedule of things you are interested in doing for the day/week?</i>

<p>15. Do you have the opportunity to do the activities you want to in the community?</p> <ul style="list-style-type: none"> • What are some things you like to do? (enter in comments) 	<ul style="list-style-type: none"> • <i>Do you tell your staff about specific activities or things that you want to do?</i> • <i>Do you feel like you get to do the things you are interested in as much as you would like to?</i> • <i>When you go out, do you get to talk to people in your community, like neighbors, or people on the street, or people that are working where you are hanging out?</i> • <i>Do you like talking with people in your community, even people you don't know well?</i>
<p>16. Are you ever told you can't go somewhere or do something you want to do?</p> <ul style="list-style-type: none"> • If yes, how often does this happen? (enter in comments) • And what is the reason someone tells you that you can't go somewhere or do what you want (for example, is it because there are no staff available at the time to assist you, or is there a lack of transportation, or are you told you have to do what others want to do instead)? 	<ul style="list-style-type: none"> • <i>Are there any times that you would like to go somewhere and are told you can't because there isn't any way to get you there?</i> • <i>Do you know how to use public transportation (same options as others in the same community) or have a ride to go?</i> • <i>Do you get frustrated if/when you aren't able to do something or go somewhere that you would like to? Do you feel like you could talk to me or someone else about those frustrations to see if we can help?</i>

END OF SECTION B. For Any Shared Living-Related Caregiver Settings, Stop Here.

Section C – All Other Residential Services (Provider Owned or Controlled, Including Shared Living-Unrelated Caregiver)

You have many rights as a resident here. Would you like to hear what rights you have? [If so, walk them through these examples, otherwise skip the examples]:

- You have a right to have protections from being removed from your home without your consent.
- You also have the right to have locks on your doors, and privacy where you sleep and live.
- You have a right to your own private room when one is available, and when it isn't, you have a right to choose your roommate.
- You have a right to furnish and decorate your room the way you want.
- You should have access to food whenever you want to eat, and you should be able to have people of your choosing come visit you whenever you want.
- You also should have the ability to control your own schedule and decide how you would like to spend your time during the day and other times when you aren't sleeping.
- You also have the right to participate in activities and engage in the greater community, and to come and go as you please here.

The only time you may not have one of these rights is if you and your team, based upon the recommendations of a medical professional, have agreed they could cause you or someone else harm. And when that happens, there is a change made to your person-centered plan to say what will be different. But otherwise, these are all things that you are entitled too. So, the next few questions are just to get a sense of what your experiences are like living here and to make sure your rights are being protected.

You have a right to have protections from being removed from your home without your consent.

SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
1. Do you own your own home or have a lease, rental agreement, or residential agreement?	<ul style="list-style-type: none"> • <i>Did people at your home tell you your rights about being a renter?</i>
2. Do you know your rights as a renter? Can you tell me any you remember? (enter in comments)	<ul style="list-style-type: none"> • <i>If yes, do you remember what any of them were?</i> • <i>If you felt that your rights as a resident here were being ignored, do you know what to do and who you could go to report the concern?</i>
3. Has any of the staff here ever threatened you that you could get kicked out of your home if you don't do what they want you to do? If yes, how often has this happened and under what circumstances? (enter in comments)	<ul style="list-style-type: none"> • <i>Has anything happened in your home where you felt your rights were being violated? For example, have you ever been told that you might have to leave your home or be evicted?</i>

Unit has a lockable door, with only them and appropriate staff having access to the keys.	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
4. Can you close and lock your front door?	<ul style="list-style-type: none"> • <i>Are you able to come into your home at any time using a key, or are there rules that say when or how you can come in?</i>
5. Do you have the key to your front door?	<ul style="list-style-type: none"> • <i>Do you have a key available to you at all times?</i> • <i>Has anyone helped you learn how to use your key(s) if you aren't sure?</i>
6. Can you close and lock your bedroom door?	<ul style="list-style-type: none"> • <i>Has anyone ever told you that you can't close or lock your bedroom door?</i>
7. Can you close and lock your bathroom door?	<ul style="list-style-type: none"> • <i>Has anyone ever told you that you can't close or lock your bathroom door?</i>
8. Did you get to decide who has a key to your bedroom?	<ul style="list-style-type: none"> • <i>Do you know if anyone else has a key to your bedroom? If so, who has a key to your bedroom? Did you say it was okay for them to have a key to your bedroom?</i>
Each individual has privacy in their sleeping or living unit.	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
9. Do others knock before entering your bedroom and bathroom?	<ul style="list-style-type: none"> • <i>When someone, (like staff, mom/dad, brother/sister, other housemates) comes into your room, do they knock and tell you who they are? And do they wait until you say it's ok to come in?</i>
10. Are you able to be alone in your room and other areas of your home?	<ul style="list-style-type: none"> • <i>Is there anyone who comes into your bedroom that you do not want in your bedroom?</i>
You also have a choice of housemates/roommates.	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
11. Do you have a housemate?	
12. If yes, did you choose your housemate/s? [If no roommate, enter N/A]	<ul style="list-style-type: none"> • <i>How did you and your housemates decide to live together (even if the person doesn't use words to share their opinions/desires)?</i> • <i>If you need to probe, ask "did you meet prior to moving in? at work?"</i> • <i>Or did you just move in? and were you just assigned (didn't have a choice)?</i>

	<ul style="list-style-type: none"> • <i>If you are married, were you given a choice to share a room with your partner?</i>
<p>13. Do you want to stay with your current housemates/s?</p> <p>[If no roommate, enter N/A]</p>	<ul style="list-style-type: none"> • <i>Do you like your roommates?</i>
<p>14. If you'd like a different housemate, do you know how to ask for one?</p> <p>[If no roommate, enter N/A]</p>	<ul style="list-style-type: none"> • <i>If not, have you asked if you can move to have a different roommate?</i>
Freedom to furnish and decorate.	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
<p>15. Did you hang pictures and decorate your room and home the way you wanted?</p> <p>Does someone help you with decorating your space? Is there anything you'd like to do differently in terms of decorating your space? (enter in comments)</p>	<p><i>When you moved in, who decorated your bedroom?</i></p> <p><i>Did you decide on:</i></p> <ul style="list-style-type: none"> • <i>What is on your walls? Any posters?</i> • <i>Where you were going to put your bed and dresser?</i> • <i>Your bedspread/comforter?</i> • <i>Any other decorations or hangings in your room?</i> • <i>Where to store your personal items?</i> <p><i>Are you told you have to keep your room tidy? Do staff tell you how to keep your room?</i></p>
Freedom and support to control schedules and activities	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
<p>16. Do you make your own schedule?</p> <p>What would you do if you wanted to change it?</p>	<ul style="list-style-type: none"> • <i>Can you get up when you want?</i> • <i>If you want to go to the kitchen, living room, or bedroom, (such as to get some water or to watch TV) do you just go or are you only allowed to be there during certain times?</i> • <i>What about if you decide you want to go out somewhere? Do you have to plan this ahead of time, or are you able to leave when you want and come back when you want?</i>
<p>17. Can you decide when you get up, take a shower, eat, exercise or do other activities?</p>	

18. Can you watch television, use the computer, listen to the radio and do things that you like when you want to?	
Access to food/drink at any time.	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
19. Can you eat or drink when you want to?	<ul style="list-style-type: none"> • <i>What do you do when you want something to eat or drink? Do you just go to the kitchen and get something, or do you have to ask?</i>
20. Do you get to eat or drink what you want to?	<ul style="list-style-type: none"> • <i>Can you request a different meal if you want one? What about if you are hungry in between meals?</i>
21. Can you eat or drink where you want to?	<ul style="list-style-type: none"> • <i>Do you sit where you want while eating? Are you allowed to eat alone if you want?</i>
Visitors at any time.	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
22. Can you have visitors at home at any time?	<ul style="list-style-type: none"> • <i>Can you have visitors at home when you want? Do you have schedule it or can they just come over when you ask them?</i> • <i>Do you ever have help to make a phone call/ text/ coordinate a time that works for you and your visitor/ /friend?</i>
23. Are visitors screened by staff?	<ul style="list-style-type: none"> • <i>Has anyone ever told you that you couldn't have a specific person visit you?</i>
24. Can you be alone with visitors if you want to?	<ul style="list-style-type: none"> • <i>Where would you go if you wanted to have privacy with your visitors here in your home?</i>
Ensures individual's rights of privacy, dignity, respect and freedom from coercion and restraint.	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
25. Do you have privacy during phone calls/texts and while using the internet?	<ul style="list-style-type: none"> • <i>Can you speak on the phone, open and read mail, and visit with others, privately?</i> • <i>Do you have a place to be by yourself during the day?</i>
26. Do you feel safe around your staff?	<ul style="list-style-type: none"> • <i>Is there any staff who have threatened you or made you feel uncomfortable?</i>
27. Do the staff that work here talk to you	<ul style="list-style-type: none"> • <i>Do staff speak about your private business in front of</i>

respectfully and treat you the way you want to be treated?	<i>others without your permission?</i>
28. Does your staff pressure you to make decisions that they want you to make?	<ul style="list-style-type: none"> • <i>Do staff ever pressure you to go somewhere you don't want to go, or to agree with what others want to do?</i>
Freedom from coercion and restraint.	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
29. Does your staff ever restrain you? Keep you from moving all or parts of your body? Or keep you in an area that you don't wish to be in? Or refuse to help you when you want to move? Or give you medicine when you don't want it?	<i>Restraints can include things like:</i> <ul style="list-style-type: none"> • <i>blocking you,</i> • <i>forcing you to move,</i> • <i>keeping you from being able to communicate,</i> • <i>placing items on you to keep you from moving (mittens, straps, helmets, etc.)</i> <i>prescribing medications that keep you from being able to do the things you like and want to do (e.g. make you confused).</i>
30. Do you have an approved Behavior Management Plan?	
The setting is physically accessible to the participant.	
SURVEY QUESTIONS	LEAD-IN QUESTIONS/TALKING POINTS
31. Do you move around your room/house as you choose?	<ul style="list-style-type: none"> • <i>Is there anything that gets in the way from you moving around? (steps? doorway lips? narrow hallways or entrances that keeps you from using all of your living areas?).</i>
32. Do you have full access to the common areas such as the kitchen, dining area, laundry, and shared living areas?	<ul style="list-style-type: none"> • <i>Do you have the help/support you need in your room/home? (e.g. grab bars, raised seats in the bathroom, shower chairs, ramps, height and location of tables/chairs, accessibility of washer and dryers for your needs?).</i>
SURVEY IS COMPLETE.	
ANSWER ANY QUESTIONS THEY MAY HAVE AND THEN THANK THEM FOR THEIR TIME.	